

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 823286

Entity Name: CROWN AUTO DEALERSHIPS, INC.**Current Principal Place of Business:**6001 34TH STREET NORTH
ST. PETERSBURG, FL 33714**Current Mailing Address:**6001 34TH STREET NORTH
ST. PETERSBURG, FL 33714 US**FEI Number:** 59-1235420**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MYERS, JAMES R.
6001 34TH STREET NORTH
ST. PETERSBURG, FL 33714 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	DT
Name	HAWKINS, TERRY
Address	6001 34TH STREET NORTH
City-State-Zip:	ST. PETERSBURG FL 33714

Title	DP
Name	MYERS, JAMES R.
Address	6001 34TH STREET NORTH
City-State-Zip:	ST. PETERSBURG FL 33714

Title	S
Name	FETKENHER, DAVID R
Address	6001 34TH STREET NORTH
City-State-Zip:	ST. PETERSBURG FL 33714

Title	D
Name	HAWKINS, KEVIN E
Address	6001 34TH STREET NORTH
City-State-Zip:	ST. PETERSBURG FL 33714

Title	VP
Name	LAMPHIER, JOSEPH K
Address	6001 34TH STREET NORTH
City-State-Zip:	ST. PETERSBURG FL 33714

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DAVID FETKENHER**SECRETARY****02/24/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date